



SAMHSA-HRSA CENTER for INTEGRATED HEALTH SOLUTIONS

Strategies for Sustainability: Consumer Engagement

2018 PBHCI Regional Meeting

A Peer Perspective

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Promoting Consumer Engagement in Integrated Care Services: Overview

- ❑ Engagement starts with the workforce
- ❑ Engaging consumers via person-centered and relationship building workflow
 - Designing screening/assessment to promote enrollment in the PBHCI service
- ❑ From engagement to commitment: effective individual and group programs focused on enhancing health promoting behavior
 - Ongoing engagement that promotes commitment and supports reassessment
 - Service planning and service delivery that promotes commitment

Engaging the Workforce



***Engagement of consumers is
everyone's business***

**Engaging the workforce to understand, value and act in ways
that continually engages consumers**

Best Practices in Consumer Engagement: Why would a person join and follow through with the PBHCI initiative?

Engagement is a process of informing and involving a client in making an ***informed decision*** and taking ***action*** related to health care services that match his/her ***felt need***

Promoting consumer commitment to services involves:

- **Person-centered Service Planning** that makes sense to the consumer, reflects preferences and felt need, non-pressured, and builds on and reinforces strengths
- **Person-centered Service Delivery** that is easily accessible, involving, fun, non-pressured, non-judgmental, not embarrassing, and builds confidence and social support

Successful Engagement: Consumer commitment to the aims of the PBHCl opportunity

- ☐ Engagement is an ongoing process that gets strengthened or weakened day by day
- ☐ Reassessment or healthcare follow up of health status is part of quality healthcare designed to benefit consumers through continuity of services and the monitoring of progress

Characteristics of wellness and healthcare services that are more likely to engage consumers

- ☐ Positive focus of the services (goals to achieve rather than the problem to solve)
- ☐ Create opportunities for consumers to identify and share strengths throughout all encounters (what's strong vs. what's wrong)
- ☐ Integrate wellness and health promoting behavior as part of the routine discussions across all services and encounters

Engaging services (continued) - wellness

- ☐ Health limitations, weaknesses, unhealthy behaviors, deficits are framed as opportunities for improvement that the consumer may decide to address
- ☐ Non-prescriptive approach doesn't use scare tactics and avoids lecturing
- ☐ Wellness topics include information that is clearly and simply presented and honestly engages consumers to consider the pros and cons of current health-related behavior
- ☐ In group settings, the size of the group enables opportunities to personalize the information (Optimally group size is 10 or less)

Marketing Matters

Label and focus the work on building confidence and the positive gains associated with the program rather than the negative losses

Characteristics of wellness and healthcare services that are more likely to engage consumers

- ☐ Action steps need to be practical in light of the consumers financial resources, age, gender, cultural values and overall health
- ☐ Building in social supports may be very helpful (e.g., engage family/friends, peer buddy system) that aligns with consumer preferences
- ☐ Health promoting activities that are fun, intrinsically rewarding, non-pressured (may be helpful to avoid the common tendency to present information in the form of a lecture full of “shoulds” “musts” and “ought to’s”)

Characteristics of wellness and healthcare services that are engaging: Confidence, Access and Inspiration

- ❑ Emphasis on personal strengths and felt need for change
- ❑ Inspiring testimonials- before and after presentations by peers to build confidence and address self-perceived barriers
- ❑ Offer opportunities to join non-pressured and easily accessible and directly observable health promoting activities - beyond talking approaches
 - Walking groups, gardening, exercise room, cooking groups, community visits

Characteristics of wellness and healthcare services that work: The role of social support

Social supports often plays an important role in motivating and engaging consumers in the long term.

- ☐ Buddy systems
- ☐ Peer led healthy lifestyle activities outside of the treatment setting
- ☐ Involvement of members of the consumers support network (e.g., family, friends) in accordance with the consumers preferences for who and what kind of support is desired.

Characteristics of wellness and healthcare services that work: The potential of peer involvement

- ☐ Utilize the power of peer led and supported health promoting services and activities
- ☐ Involve participants in the development of wellness activities and programs
- ☐ Peer support, self-help, peer led and peer co-led activities and programs offer unique opportunities to inspire and engage consumers
- ☐ In what way has your program involved peers as an integral part of the PBHCI service?

Stretch Break





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What Helps & What Hurts Activity 2018 PBHCI Regional Meeting

Instructions:

Designate a notetaker and for the next 15 minutes brainstorm the following topics:



- The impact of insensitive language sometimes used by staff vs. helpful words or language that facilitates trust
- Staff actions take that may negatively impact client relations vs. actions that facilitate engagement
- Environmental factors that may cause a client to feel uncomfortable or unsafe vs. an environment designed with client safety and comfort in mind

Brainstorm Debrief



Topic	What do we need to STOP doing?	What do we need to START doing?	What do we need to CONTINUE doing?
Insensitive Language vs. Trust Building Language	•	•	•
Negative Staff Actions vs. Facilitating Client Engagement	•	•	•
Negative Environment vs. Positive Environment	•	•	•



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Consumer Engagement: Best Practices in Group Facilitation

2018 PBHCI Regional Meeting

Disclaimer

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Benefits of Groups

- Personal benefits to participants
- Universality (you're not alone)
- Social/emotional support from people you trust
- Safe way to try out new behaviors
- Social-observational learning
- Builds hope and confidence
- Corrective experiences (opportunities for people to receive feedback on their thinking/beliefs/behaviors)
- Power of peers to influence behavior

Best Practices in Group Facilitation are Designed to Reduce the Likelihood of Falling into Common Pitfalls

- The Meandering Group
- The Monopolized Group
- Individual Therapy with an Audience Group
- Multiple Individual Therapy with an Audience Group
- The “Pulling Teeth” Group OR Group Leader Does Most of the Talking Group
- The “Lecture/Sermon” Oriented Group
- The “I Just Hope to Survive This Group” Group
- The “Filler Group” - I don’t care what we talk about because we need to “fill in” the time

Group is Not for Everyone: Who Does Best?

Clients who say....

- I like to share my feelings with others
- When I first meet someone, I like to share things about myself, including personal information
- I think that working in a group will really help me
- If I participate in a group, I expect to feel quite a bit better when we are finished
- I think that sharing my feelings with others will help me feel better
- I am an open person
- I generally trust the group leader and the participants

Step 1: Preparing the Client

- Prior to joining a group, participants are provided with information about the purpose of the group, what is expected of group members and the topics covered (e.g., a brochure along with sample lessons or materials for prospective participants to review)
- Explore the participants' past experiences and concerns about groups
- Assist the individual to consider how his/her personally meaningful goals may be supported by the group program
- Discuss ground rules to promote safety
 - ***The critical aim is to ensure that the person understands that all group members need to respect confidentiality and to create a safe environment.***

Importance of Ground Rules

- Ground rules promote safety and help people to stay on task. (for example)
 - One person talks at a time
 - Treat each other with respect (no put downs)
 - What is said here stays here
 - Stay on topic
 - Avoid separate conversations
- Ground rules are established very early on in the process, typically during the first group meeting.
- It is essential to engage group participants in establishing their ground rules – this will result in members owning them.
- Posting ground rules also helps

Principles of Adult Learning that Guides Group Process

- **Personal Relevance:** “Why should I care?” - Identification of benefits based on clients’ felt need
- **Practical Application:** “Is this really something I can accomplish? How will I know?” - Small steps that are self selected and monitored to build confidence and provide feedback
- **Multi-sensory Learning:** “How can I remember this stuff?” - Written and spoken information that is clear and understandable, personalized worksheets, demonstrations and active practice
- **Self Direction:** “Who is in charge anyway?” - Maximize self selection of action steps designed to assist participants to apply learning
- **Context Specific:** “How do I make this work for me in my day to day experience?” - Ensure clients select goals and action steps that make sense in light of living situation, finances, access to resources, social connections

Effective Groups Have Three Major Components

Important Information (Tell and/or show)

- What is this topic about?
- Why is it important?

Personalizing the Information (Tell and show)

- How does the participant connect to the topic?
- How do we assist each person to identify an area they would like to improve or learn more about?

Action Steps (Do)

- How do we provide support and guidance to participants to consider taking action on the topic area?

Note: Discussion questions are employed throughout to promote group sharing, clarification of issues, building a sense of “We”

The R.O.P.E.S. Framework: One Effective Approach to Facilitating Groups Based on Adult Education

R = Review

O = Overview

P = Presentation

E = Exercise

S = Summary

Cohen, M., Danley, K., & Nemec, P. B. (1985). *Psychiatric rehabilitation practitioner package: Direct skills teaching*. Boston, MA: Boston University, Center for Psychiatric Rehabilitation.

Carkhuff, R. R., & Berenson, B. G. (1976). *Teaching as treatment: An introduction to counseling and psychotherapy*. Amherst, MA: Human Resource Development Press.

Beginning a Group (Review and Overview)

Designed to promote:

- Continuity and follow up from the previous lesson
- Engaging, orienting and motivating learners about the topic of the current lesson
- Immediate involvement and acknowledgment of client knowledge and experience

There are five steps involved

STEP 1: Review of important points from previous lesson

STEP 2: Review of any action step taken by participants since last session

STEP 3: Review of participants' current knowledge of and experience with the current topic

STEP 4: Review of participants' understanding of the importance of the current topic

STEP 5: Overview of the current group agenda

The Overview

- What is it? An introductory outline or “roadmap” of the material to be covered.
- Why is it important? It focuses participants on the main points of the learning experience and promotes a sense of safety and predictability by explaining expectations and responsibilities.

Examples of Group Facilitator Language in the Beginning of a Group (Review and Overview)

ASK: What was one of the important points you took away from the last group?

CHECK: Who chose to take action based on the last session? What was your experience?

STATE: Today we are starting/continuing a topic called ___that starts on page___ of your workbook/handout

STATE: The plan for today includes reading and discussing important information on the topic, exploring how this relates to your life, and giving you the opportunity to decide and plan an Action Step

ASK: Let's begin by discussing what experience group members have had with this topic. What does the topic mean to you? What experience have you had with this topic?

ASK: Why is this topic important?

The Middle of a Group: Presentation: Tell-Show-Do

Tell: Reading, reviewing and discussing important information about the topic (What the topic is about and why it's important)

Show and Do: Personalizing the topic

- Using checklists, demonstrations, audio-visual aids, surveys and/or questions that require personalized responses.
- Opportunity for participants to visualize possibilities (show) and have guidance on how one may connect to the topic in their own personalized manner (do)
- Helps to identify strengths and areas to consider improving

Include Discussion Points:

Promotes sharing and expression of ideas, questions and reactions

Examples of Group Facilitator Language: Presentation

This phase engages participants in reading and learning about the topics – What it is and why it is important

ASK: Who would like to begin reading information about the topic?

ASK: Now that we've read and discussed the topic, are there any questions about the information we discussed?

STATE: One of the goals of the lesson/class is to make sure everyone gets a chance to relate the topic to his/her own life. (Introduce the method to engage each participant in connecting the topic to their felt need and situation)

STATE: In what way is the topic related to what's important to you?

The Middle of the Group: Exercise

- The Exercise phase involves offering participants the opportunity to apply what they learned before the next session
- Like physical exercise, actual application and practice strengthens learning
- Include brief planning guide

Example of Group Facilitator Language

EXERCISE:

STATE: One of the important goals of this group is to give you the opportunity to continue your learning and apply what you have learned in a way that works for you through completing an action step

ACTION STEP:

ASK: The lesson provides a guide that you may choose to use to decide on an action step in the coming week

STATE: The Action Step is not homework or an assignment, it is an opportunity for you to build on your learning if that works for you. You might find it helpful to consider action steps to get the most out of the BRITE program.

Example of an Action Step Planning Guide

What I will do in the coming week:

When? _____

Where? _____

I will involve _____ in helping me take this action step.

What might get in my way and how I will deal with this _____

How will I know that I accomplished my action step

Action Step Options

- Beyond individual actions, some action steps may involve a subset of clients with the same area of interest (e.g., buddy system)
- In some topic areas, the entire group may choose an action step together (e.g., hold a meeting with senior leadership, community field trips, group artistic project)

The Summary: How to End a Group

- The ending of a group corresponds to the Summary component of a R.O.P.E.**S**. teaching process.
- What is it? A very quick review of the material covered in the session and participants' reactions to the material.
- Response of clients to the lesson/session
 - Helpful
 - Personally meaningful
 - What I hoped to get from joining this group
- Why is it important?

It reinforces learning, assesses participants' understanding and gathers important feedback from participants

Summary: Example of Group Facilitator Language

- ASK: What was one main point you took from today's lesson? What idea was helpful to you?
- ASK: How do you feel about today's group? Was the topic interesting and helpful or not? Did we go too fast, too slow or just right? How well did we work as a group today?
- STATE: I'd like to share my thoughts about today's group.
(place emphasis on positive feedback and reinforcement for all efforts and behaviors that contributed to the group)